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OMB APPROVAL FORM D OMB Number:..... 3235-0076 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Expires: ..... April 30, 2008 Estimated average burden Washington, D.C. 20549 hours per response...... 1.00 DEC 26 2007 FORM D OTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION Name of Offering (Check if this is an amendment and name has changed, and indicate change.) ACG TIC Equity Fund I, LLC | Fractional Undivided Membership Interests ULOE Filing Under (Check box(es) that apply.): **Rule 504** Rule 505 X Rule 506 Section 4(6) Type of Filing: New Amendment A. BASIC IDENTIFICATION DATA JAN 1.0 2008 1. Enter the information requested about the issuer. Name of Issuer (Check if this is an amendment and name has changed, and indicate change.) THOMSON ACG TIC Equity Fund I, LLC Telephone Number (Alea Code) Address of Executive Offices (Number and Street, City, State, Zip Code) 110 - 110th Avenue NE., Suite 550, Bellevue, Washington 98004 425-455-2433 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (including Area Code) (if different from Executive Offices) same as above same as above -**Brief Description of Business** Multi-family apartment complex ownership. Type of Business Organization: corporation limited partnership, already formed X other (please specify): business trust limited partnership, to be formed limited liability company Month Year 0 9 0 7 Actual or Estimated Date of Incorporation or Organization: X Actual **Estimated** (Enter two-letter U.S. Postal Service abbreviation for State: CN for Jurisdiction of Incorporation or Organization:

## **GENERAL INSTRUCTIONS**

## Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.502 et seq. or 15 U.S.C. 77d(6).

Canada; FN for other foreign jurisdiction.).....

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any change thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

## State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## — ATTENTION —

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

	A. BASIC II	ENTIFICATION D	ATA	
	ne issuer has been organ e power to vote or dispos tor of corporate issuers a	e, or direct the vote or and of corporate genera	disposition of, 10	0% or more of a class of equity partners of partnership issuers; and
Each general and managing par		rs		
Check Box(es) that Apply: X Promoter Full Name (Last name first, if individual)		Executive Officer	Director	General and/or Managing Partner
American Real Estate Fund Business or Residence Address: (Numb 110 – 110 <sup>th</sup> Avenue NE, Sui	per and Street, City, State,	Zip Code) Ishington 98004		
Check Box(es) that Apply: X Promoter	<del></del> :		X Director(2)	General and/or Managing Partner
Full Name (Last name first, if individual) Wood, Jon A.				
Business or Residence Address: (Numb 110 – 110 <sup>th</sup> Avenue NE, Sui				
Check Box(es) that Apply: X Promoter	X Beneficial Owner(1)	Executive Officer	X Director(2)	General and/or Managing Partner
Full Name (Last name first, if individual) Kuula, Roger W.				
Business or Residence Address: (Number 110 – 110 <sup>th</sup> Avenue NE, Sui	per and Street, City, State, te 550, Bellevue, Wa	Zip Code) ashington 98004		
Check Box(es) that Apply: X Promoter	X Beneficial Owner(1)	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)  JKS Partners, L.P.				
Business or Residence Address: (Numb 700 Overlake Drive East, M				
Check Box(es) that Apply: X Promoter	Beneficial Owner	Executive Officer	X Director(2)	General and/or Managing Partner
Full Name (Last name first, if individual) ACG TIC Equity Fund I Mar				
Business or Residence Address: (Numb 110 – 110 <sup>th</sup> Avenue NE, Sui	per and Street, City, State, te 550, Bellevue, Wa	Zip Code) Ishington 98004	· · · · · · · · · · · · · · · · · · ·	
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address: (Numb	per and Street, City, State,	Zip Code)	· · · · · · · · · · · · · · · · · · ·	
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)			<u> </u>	
Business or Residence Address: (Numb	per and Street, City, State,	Zip Code)		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address: (Numb	per and Street, City, State,	Zip Code)		_ <del>_</del>
(Use blank	sheet, or copy and use	additional copies of t	this sheet, as ne	cessary.)
(1) Beneficial owner of Americ (2) Manager.	an Real Estate Fund	i, LLC.		

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						<u> </u>	NFOR	RMATI	ON A	BOUT_	OFFE	RING				
1.				or does						redited	investo	ors in thi	s offering?		Yes	No X
2.	What is the minimum investment that will be accepted from any individual? (1)										\$ <u>50</u> ,	000				
3.	Does th	ne offer	ing per	mit joint	owne	rship of	a singl	e unit?			•••••				Yes	No X
4.	similar is an a the bro	remun ssociat ker or (	eration ed pers dealer.	for solid	citation agent of than t	of purc of a brok five (5) i	hasers (er or ( person	in con dealer i s to be	nection register	with sa	les of the SE	securitie C and/o	es in the of or with a s	fering. If a tate or stat	, any comm a person to tes, list the dealer, you	be listed name of
Fu	II Name ( <b>Ameri</b>			t, if indiv tate Se		ies, Ind	<b>:</b> .									
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	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR			
Fu	ll Name (	Last na	me firs	t, if indiv	idual)											
Bu	siness o	Reside	ence Ad	ldress: (	(Numbe	er and S	treet, C	City, Sta	te, Zip (	Code)				·		
Na	ime of As	sociate	d Broke	er or Dea	aler											
Sta	ates in wi													<u>_</u>		II States
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	AL IL	AK IN	AZ IA	AR KS	CA KY	CO LA	CT ME	DE MD	DC MA	FL MI	GA MN	HI MS	ID MO			
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA			
	RI	SC	SD	TN	TX	UT	VT	VA	WA	W	WI	WY	PR			
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				(Use bla	ank sh	eet, or c	opy ar	nd use a	additior	nal copie	es of th	is sheet	, as neces	sary.)		

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(1) Or such lesser amount as Issuer may allow.

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND US	SE OF PRO	CEE	DS
1. Enter the Aggregate price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box ☐ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Aggregate Offering Price		Amount Already Sold
Type of Security  Debt		\$	-0-
		•	
Equity	-0-	•	<u>-0-</u>
Convertible Securities (including warrants)\$	<u>-0-</u>	\$	-0-
Partnership Interests\$	-0-	\$	-0-
Other (Specify: Fractional Undivided Interests ) \$	10,000,000	\$	735,342
Total\$	10,000,000	\$	735,342
(Answer also in Appendix, Column 3, if filing under ULOE.)			
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "O" if answer is "none" or "zero."	Number of Investors		Aggregate Dollar Amount of <u>Purchases</u>
Accredited Investors		\$	735,342
Non-accredited Investors		\$	-0-
Total (for filings under Rule 504 only)	N/A	\$	N/A
<ul> <li>(Answer also in Appendix, Column 4, if filing under ULOE.)</li> <li>3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in</li> </ul>			
Part C—Question 1.  Type of Offering	Type of Security		Dollar Amount Sold
Rule 505	N/A	\$	N/A
Regulation A	N/A	\$	N/A
Rule 504	N/A	\$	N/A
Total	N/A	\$	N/A
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
Transfer Agent's Fees		<b>5</b>	-0-
Printing and Engraving Costs		<b>X</b> \$	20,000
Legal Fees		X \$	75,000
Accounting Fees	***************************************	X \$	5,000
Engineering Fees		<b>S</b>	-0-
Sales Commissions (specify finders' fees separately) (1)	•••••	<b>X</b> \$	900,000
Other Expenses (Identify: Blue Sky Fees; Miscellaneous Offering Expenses) (2	)	X \$	101,125
Total	•••••	X \$	1,101,125

<sup>(1)</sup> Represents 7.5% selling commissions (\$750,000) and 1.5% placement fee (\$150,000).
(2) Inclusive of 1.0% due diligence expense allowance (\$100,000).

	C. OFFERING PRICE, NUMBER OF INVESTORS,	EXPENSES	ΑN	Dι	JSE OF PR	OCEE	DS
	<ul> <li>b. Enter the difference between the aggregate offering price given Part C—Question 1 and total expenses furnished in response to Part 4.a. This difference is the "adjusted gross proceeds to the issuer."</li> </ul>	C—Question				\$	8,898,875
5.	Indicate below the amount of the adjusted gross proceeds to the iproposed to be used for each of the purposes shown. If the arpurpose is not known, furnish an estimate and check the box to estimate. The total of the payments listed must equal the adjusted gross to the issuer set forth in response to Part C—Question 4.b above.	mount for any the left of the ross proceeds			Payments to Officers, Directors & <u>Affiliates</u>		Payments to <u>Others</u>
	Salaries and fees			<b>\$</b> _	-0-	\$	
	Purchase of real estate			\$	-0-	X \$	<u>8,754,375</u>
	Purchase, rental or leasing and installation of machinery and equip	ment		\$_	<u>-0-</u>	<u> </u>	0-
	Construction or leasing of plant buildings and facilities			\$_	-0-	<b>\$</b>	
	Acquisition of other business (including the value of securities involonged offering that may be used in exchange for the assets or securities of issuer pursuant to a merger)	f another		·	-0-	□s	-0-
	• •		느	· –			
	Repayment of indebtedness		=		-0-	<b> </b> \$	<del>_</del>
	Working capital	***************************************	Ш	\$_	-0-	\$	<u>-0-</u>
	Other (specify):  Closing and miscellaneous expenses			<b>\$</b> _	0-	X \$	44,500
	Organizational expenses			\$_	-0-	X \$	100,000
	Column Totals	1*1************************************		\$	0-	X \$	8,898,875
	Total Payments Listed (column totals added)	X \$ 8,898,875					
	D. FEDERAL SIGN	ATURE					
Ru	ne issuer has duly caused this notice to be signed by the undersignule 505, the following signature constitutes an undertaking by the commission, upon written request of its staff, the information furnished aragraph (b)(2) of Rule 502.	issuer to furni	ish	to t	he U.S. Secu	rities	and Exchange
Iss	suer (Print or Type) Signature	<del>)</del>			Date 12 /2	11	2007
	ACG TIC Equity Fund I, LLC	7		-	- 14/2	<b>O</b> / 2	2007
Na	ame of Signer (Print or Type) Title of Signer						
	Jon A. Wood By: ACG TIC Equality: Manager	iity Fund I M	ana	ige	r, LLC		
	By: Jon A. \ lts: Manage						
	<del></del>						<del></del>

— ATTENTION —

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

